

Application of Docket Number

Application of Docket Number
09/966507

(Column 1)	(Column 2)
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OR

OR OTHER THAN
SMALL ENTITY

MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))

TOTAL

TOTAL

(Column 1)	(Column 2)	(Column 3)
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OF

OR OTHER THAN
SMALL ENTITY

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(b))TOTAL
ADD'LTOTAL
ADD'L

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

TOTAL
ADD'L FEETOTAL
ADD'L FEE

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.